

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

10687174

FILING DATE

10-15-03

APPLICANT(S)

CLAIMS						
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		
NO	DEP	NO	DEP	NO	DEP	
1	1					
2	1					
3	1					
4	1					
5	1					
6	1					
7	1					
8	1					
9	1					
10	1					
11	2	2		2		
12	1					
13	1					
14	1					
15	1					
16	1					
17	1					
18	1					
19	1					
20	1					
21	1					
22	1					
23	1					
24	1					
25	6	6		6		
26	8	8		8		
27	4	4		4		
28	1					
29						
30						
31						
32						
33						
34						
35						
36						
37						
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL NO.		TOTAL DEP.		TOTAL CLAMS		
11		43		44		
42		44		48		

44